SECTION M. LIFE EVENT HISTORY

M0. The next questions are about events that sometimes happen to people, and could affect their ability to get or keep a job. Please look at this card (HAND R "LIFE EVENTS" CARD).

INTERVIEWER: DO NOT READ THE DESCRIPTION LISTED FOR EACH EVENT UNLESS R CANNOT USE THE CARD. SIMPLY READ THEM AS "Event #1", "Event #2", etc.

M1. Did Event #1 ever happen to you (YOU HAD DIRECT COMBAT EXPERIENCE IN A WAR)?

1. YES

5. NO

M2. Did Event #2 ever happen to you (YOU WERE INVOLVED IN A LIFE THREATENING ACCIDENT)?

1. YES

5. NO → NEXT PAGE, M3

M2a. Did this happen in the past 12 months?

1. YES

5. NO

M3. (How about) Event #3, (YOU WERE INVOLVED IN A FIRE, FLOOD, OR NATURAL DISASTER)? (Did this ever happen to you?)

1. YES

5. NO → GO TO M4

M3a. Did this happen in the past 12 months?

1. YES

5. NO

M4. (Did) Event #4 (ever happen to you)? (YOU WITNESSED SOMEONE BEING BADLY INJURED OR KILLED)

1. YES

5. NO → GO TO M5

M4a. Did this happen in the past 12 months?

1. YES

5. NO

M5. (Did) Event #5 (ever happen to you)? (YOU WERE RAPED)

1. YES

5. NO → NEXT PAGE, M6

M5a. Did this happen in the past 12 months?

1. YES

5. NO

M6. (Aside from when Event #5 happened, did) Event #6 (ever happen to you)? (YOU WERE SEXUALLY MOLESTED)

1. YES

5. NO → GO TO M7

M6a. Did this happen in the past 12 months?

1. YES

5. NO

M7. (Aside from any event on the list you have already reported, did) Event #7 (ever happen to you)? (YOU WERE SERIOUSLY PHYSICALLY ATTACKED OR ASSAULTED)

1. YES

5. NO → GO TO M8

M7a. Did this happen in the past 12 months?

1. YES

5. NO

M8. (Aside from any event you have already reported, did) Event #8 (ever happen to you)? (YOU WERE PHYSICALLY ABUSED AS A CHILD)

1. YES

5. NO

M9. (Did) Event #9 (ever happen to you)? (YOU WERE SERIOUSLY NEGLECTED AS A CHILD)

1. YES

5. NO

M10. (Aside from any event you have already reported, did) Event #10 (ever happen to you)? (YOU WERE THREATENED WITH A WEAPON, HELD CAPTIVE, OR KIDNAPPED)

1. YES

5. NO → GO TO M11

M10a. Did this happen in the past 12 months?

1. YES 5. NO

M11. Have you ever had any other terrible experience that most people never go through?

1. YES

5. NO → GO TO M12

M11a. Did this happen in the past 12 months?

1. YES 5. NO

M11b. Could you briefly tell me something about this?

_____

_____

_____

M12. Did Event #12 ever happen to you? (YOU SUFFERED A GREAT SHOCK BECAUSE ONE OF THE EVENTS ON THIS LIST HAPPENED TO SOMEONE CLOSE TO YOU)

1. YES

5. NO → NEXT PAGE, M13

M12a. Did this event happen in the past 12 months?

1. YES 5. NO

M13. INTERVIEWER CHECKPOINT

SEE PGS. M1–M12

☐ 1. ONE [YES] RESPONSE IN M1–M12 ⟶ NEXT PAGE, M15a

☐ 2. TWO OR MORE [YES] RESPONSES IN M1–M12

☐ 3. ALL OTHERS ⟶ TURN TO P. 86, SECTION N

M14. Which of the experiences on the list was most upsetting for you? (You can just tell me the number.)

☐ 01. COMBAT EXPERIENCE

☐ 02. LIFE-THREATENING ACCIDENT

☐ 03. FIRE, FLOOD, NATURAL DISASTER

☐ 04. WITNESSED BAD INJURY/DEATH

☐ 05. RAPED

☐ 06. SEXUALLY MOLESTED

☐ 07. PHYSICAL ATTACK/ASSAULT

☐ 08. PHYSICALLY ABUSED AS A CHILD

☐ 09. SERIOUSLY NEGLECTED AS A CHILD

☐ 10. THREATENED WITH A WEAPON, HELD CATIVE, OR KIDNAPPED

☐ 11. OTHER(S)

☐ 12. SUFFERED A GREAT SHOCK

NEXT PAGE, M15b

M15a. You experienced one of the events on the list. The next few questions are about how you felt <u>after</u> that experience.	**M15b.** The next few questions are about how you felt <u>after</u> that experience.

	YES (1)	NO (5)	DON'T KNOW (8)
M16. First, did you keep remembering the event when you did not want to?			
M17. Did you keep having dreams or nightmares about it afterwards?			
M18. Did you ever suddenly act or feel as though the event was happening again, even though it wasn't?			
M19. Did you ever get very upset when you were in a situation that reminded you of it?			

M20. INTERVIEWER CHECKPOINT

☐ 1. ONE OR MORE [YES] RESPONSES IN M16–M19

☐ 2. ALL OTHERS → TURN TO P. 86, SECTION N

M20a. Did (this reaction/any of these reactions) happen during the past 12 months?

[1. YES] [5. NO]

M20b. Did you ever have (this reaction/any of these reactions) <u>a few times a week</u> for at least a month because of this experience?

[1. YES] [5. NO]

	YES (1)	NO (5)	DON'T KNOW (8)
M21. After the experience, did you find you no longer had loving or warm feelings toward anyone?			
M22. Did you go out of your way to avoid situations that might remind you of the event?			
M23. Did you try hard not to think about it?			
M24. Did you develop a memory blank so that you could not remember certain things about the event?			
M25. Did you feel isolated or distant from other people afterwards?			
M26. Did you begin to feel that there was no point in thinking about the future?			
M27. Did you lose interest in doing things that used to be important to you?			

M28. INTERVIEWER CHECKPOINT

☐ 1. THREE OR MORE [YES] RESPONSES IN M21–M27

☐ 2. ALL OTHERS → TURN TO P. 86, SECTION N

M28a. Did any of these reactions happen during the past 12 months?

[1. YES] [5. NO]

M28b. Did you ever have any of these reactions <u>a few times a week</u> for at least a month because of this experience?

[1. YES] [5. NO]

	YES (1)	NO (5)	DON'T KNOW (8)
M29. After the experience, did you have more trouble concentrating than is usual for you?			
M30. Did you act unusually irritable or lose your temper a lot?			
M31. Did you have more trouble sleeping than is usual for you?			
M32. Did you become overly concerned about danger or overly careful?			
M33. Did you become jumpy or easily startled by ordinary noises or movements?			
M34. Did you sweat or did your heart beat fast, or did you tremble when reminded of the upsetting experience?			

M35. INTERVIEWER CHECKPOINT

☐ 1. TWO OR MORE [YES] RESPONSES IN M29–M34

☐ 2. ALL OTHERS → TURN TO P. 86, SECTION N

M35a. Did any of these reactions happen during the past 12 months?

[1. YES] [5. NO]

M35b. Did you ever have any of these reactions <u>a few times a week</u> for at least a month because of this experience?

[1. YES] [5. NO]